

Massachusetts Hospital Preparedness Program Advisory #2- 2003

DATE: January 14, 2003

TO: Chief Executive Officers, Member Hospitals and Health Systems

FROM: Leslie Kirle, Senior Director, Clinical Policy & Patient Advocacy

RE: Information regarding potential impact on hospitals from military smallpox

vaccinations and update on liability protection for hospitals for smallpox vaccination

CONFERENCE CALL: Please participate in an important and wide-ranging conference call on Smallpox Issues this Thursday January 16, from 10 a.m. to 11 a.m.

Your hospital's Smallpox Coordinator, Disaster Designee, and Public Relations Director should call in on Thursday.

To participate, dial 1-800-791-2345, Pin #50375

This MHA Hospital Preparedness Advisory contains:

- Recommendation that hospitals survey employees to determine if any are also
 military reservists. Given the military call-up of reservists in selected areas,
 hospitals should begin planning for the impact on hospital operations from the
 staffing shortage.
- Recommendation that hospitals ask military reservists who are also employees to alert them should they receive the smallpox vaccine.
- Amplification of smallpox liability protection for hospitals.
- Advice regarding military vaccinees with possible adverse events being referred to civilian hospitals.

Recommendations for hospitals employing military reservists

The U.S. military is administering smallpox (vaccinia) vaccinations to selected military reservists who may work in civilian hospitals in addition to full-time military personnel. The AHA is recommending that hospitals determine who on staff is a reservist and that you ask those employees to inform you immediately if they are vaccinated, due to the very slight risk of spreading the virus from the vaccination site to another person.

Further, hospitals should consult with their legal counsels about whether your current policy on vaccinated employees should be extended to reservists.

In addition, hospitals should begin planning for the potential impact on hospital operations should the military begin calling up reservists.

Smallpox Liability

January 24, 2003, is the effective date of the Homeland Security Act, including the liability protection provisions under Section 104 of the Act. On January 9, U.S. Health & Human Services (HHS) Secretary Tommy Thompson sent a letter to AHA President Dick Davidson in which he stated that HHS intends "that hospitals that designate employees to receive smallpox countermeasures under the state's smallpox vaccination plan are participants in the program and thus are health care entities under whose auspices the countermeasure is administered." Thompson was responding to hospital concerns about the Centers for Disease Control and Prevention's narrow interpretation of Section 304, which would have left hospitals not providing vaccinations, but taking part by urging employees to receive the voluntary vaccinations, unprotected from liability in several cases. The letter from Secretary Thompson described one scenario under which Hospital A would be protected from liability:

"Healthcare worker from Hospital A is vaccinated at Hospital B and then sheds vaccinia to a patient at Hospital A while working within the scope of employment."

AHA is following up with HHS counsel on specific language to clarify this determination.

Referral of Military Personnel with Possible Adverse Events to Hospital Services

The military is vaccinating active duty personnel and others. Some of these individuals may be instructed to seek medical care at civilian facilities and, specifically, at hospital emergency departments should they experience a potential adverse event. You should be aware of this possibility and provide emergency department staff with available information on adverse events (see Vaccinia (Smallpox) Vaccine: Recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 2001: 50(No.RR-10): 1-25 at http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5010a1.htm). If hospital emergency departments require assistance, contact the state's epidemiologist on-call 24/7 at (617) 983-6200. Please note that it is expected that vaccination of hospital teams will not start earlier than mid-February.

Other Resources

Other resources for questions about vaccination are as follows:

SMALLPOX FACT SHEET
Smallpox Overview

http://www.bt.cdc.gov/agent/smallpox/overview/disease-facts.asp

SMALLPOX FACT SHEET Vaccine Overview

http://www.bt.cdc.gov/agent/smallpox/vaccination/facts.asp

SMALLPOX FACT SHEET Caring for the Smallpox Vaccination Site

http://www.bt.cdc.gov/agent/smallpox/vaccination/site-care-pub.asp

Someone You Are Close to Is Getting the Vaccine: What You Should Know and Do

http://www.bt.cdc.gov/agent/smallpox/vaccination/close-contacts.asp

Also, a web cast, *Smallpox: What Every Clinician Should Know*, is especially helpful and can be accessed at http://www.cdc.gov/nip/ed/smallpox-trg/clinician-should-know/default.htm.

Please note that you can also order a free video copy of this broadcast by calling the Public Health Foundation at 1 (877) 252-1200, 9 a.m. to 5 p.m. EST, or by e-mailing mailto:info@phf.org. When emailing a request for a videotape, please indicate "Smallpox: What Every Clinician Should Know" in the subject line.

Reminder

As you work on your preparedness plans, considerations must go beyond smallpox. We expect to continue to receive a stream of alerts as to the potential danger from agents such as ricin (the agent that Scotland Yard found in a London apartment last week), anthrax, and cyanide exposure.

For questions about hospital preparedness in general, please feel free to contact me at (781) 272-8000, ext. 124; lkirle@mhalink.org; or call MHA's Director of Hospital Preparedness Mary Crotty at extension 136; mcrotty@mhalink.org. If you have any questions about the Massachusetts smallpox pre-event plan, please contact Susan Lett, M.D., Medical Director, DPH Immunization Program at (617) 983-6800; Susan.Lett@state.ma.us.

cc: Disaster Designees

V.P./Directors, Public Relations